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SUBJ/PUBLIC AFFAIRS-NAVAL SERVICE MEDICAL NEWS (NSMN) (94-08)//
POC/CAPT P.C. BISHOP/-/MED-00P (PUBLIC AFFAIRS)/-/TEL:(202)
653-1315/TEL:DSN 294-1315//

RMKS/1. THIS SERVICE IS FOR GENERAL DISTRIBUTION OF
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2. RESPECTFULLY REQUEST FLEET COMMANDERS READD TO SHIPS AND
OTHER SUBORDINATES WITH MEDICAL PERSONNEL, AS OPERATIONAL
CONDITIONS PERMIT.

3. HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:
(940056)-NAVY ARRIVES IN CROATIA
(940057)-MEDICAL DEPARTMENT ADMIRALS RECEIVE SECOND STARS
(940058)-CORPSMAN'S HEROISM EARNS NAVY AND MARINE CORPS MEDAL
(940059)-NAVY MEDICAL TEAM SAVES LIFE OF GERMAN TOURIST
(940060)-CORPSMAN AIDS VICTIM
(940061)-GOOD SAMARITAN ACT ENCOURAGES HEROES TO STEP FORWARD
(940062)-GRAND ROUND ABSTRACTS
(940063)-HEALTHWATCH: END 'NUTRITION MONTH' WITH PERSONAL CHANGE

HEADLINE: Navy Arrives in Croatia

UNPROFOR Camp Pleso, Zagreb, Croatia (NSMN) -- The first
wave of people who will be assigned to Fleet Hospital Zagreb
arrived here last week to replace the 48th Air Transportable
Hospital (Deployed). The transition will last about three weeks
with the assumption of mission ceremony taking place 17 March.
Fleet Hospital Zagreb will be commanded by Navy CAPT James A.
Johnson, MC, deputy commander, Naval Medical Center San Diego.

Thirty-five Marine military police arrived 7 March. They
were followed on 8 March by 64 Navy Medical people and 37
SeaBees. The MPs from the 2nd Force Service Support Group, Camp
Lejeune, NC, will provide security for the camp after the
security police from the 48th Security Police Squadron depart.
The SeaBees, from Naval Mobile Construction Battalion 40, forward
deployed at Rota, Spain, from Port Hueneme, CA, will replace the
601st Civil Engineering Squadron Prime Base Emergency Engineering
Force out of Sembach, Germany.

The medical and dental personnel who are replacing the

members of the 48th are from a number of stateside units, including San Diego's Naval Medical Center and Naval Dental Center; Naval Hospitals at Camp Pendleton, Lemoore, Long Beach, Oakland and 29 Palms, all in California; Oak Harbor and Bremerton, WA; and Naval Medical Clinics at Port Hueneme and Seattle.

The main body of the 48th ATH (Deployed) is out of RAF Lakenheath, U.K., however, it included people from Ramstein, Sembach and Bitburg Air Bases in Germany; Soesterberg AB, the Netherlands; and RAF Chicksands, U.K.

Fleet Hospital Zagreb will be taking over the 60-bed hospital that is the main emergency treatment center for all United Nations Protection Force (UNPROFOR) personnel in the former Republic of Yugoslavia. The center provides emergency treatment for more than 32,000 people from around three dozen countries.

Since their deployment here in September 1993, the 48th ATH has seen about 6,000 outpatients and 450 inpatients.

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HEADLINE: Medical Department Admirals Receive Second Stars
BUMED Washington (NSMN) -- Congratulations to admirals Richard A. Nelson, MC, and William H. Snell, DC, on their second stars.

Secretary of the Navy John H. Dalton announced 25 February 1994 that the President had nominated these officers for promotion to the permanent grade of rear admiral (upper half).

Nelson is commander, Naval Medical Center San Diego.

Snell is the Navy Medical Inspector General, Bureau of Medicine and Surgery.

-USN-

HEADLINE: Corpsman's Heroism Earns Navy and Marine Corps Medal
NNMC Bethesda, MD (NSMN) -- HM2 James Ortiz was recently awarded the Navy and Marine Corps Medal, the highest medal given for heroism during peacetime, for taking the words of his 8-year-old daughter seriously.

On 17 June 1993, Jessica Ortiz ran into her house in Kensington, MD, to tell her father that a friend's babysitter was lying face down on the kitchen floor with her fingers twitching.

Ortiz recalled the events.

"I could see the look of fear in her eyes, I knew that there was something wrong. It was not just someone who had fallen or tripped. That's really what prompted me to get moving," said Ortiz, gripping the arms of his chair as if to jump out of it.

"Being a corpsman, all kinds of things went through my mind. Maybe she's a diabetic. I didn't know what her age was, maybe she's just having an epileptic seizure.

"I followed my daughter to her girlfriend Hannah's house. I was about 50 feet away from the building and I could smell the gas. That's when I became alarmed. I thought, 'If there's a spark, this whole place is going up in smoke.' I told my daughter to stay there, and don't come into the building.

"As soon as I went into the door, I saw Hannah (6), and her

little brother Samuel (4), walking up and down the hallway on the first floor, disoriented. I just grabbed them and took them outside.

"As I'm taking them out, I asked them who else was in the house," Ortiz said rapidly. "They said that their little sister Elizabeth was upstairs and the babysitter was in the kitchen, but they couldn't open the door."

Ortiz led the two children safely away from the home, told the next-door neighbor to call 911, and then made his second dash into the gas-filled home for the remaining victims.

"I ran upstairs and I saw this little 2-year-old baby just lying down, unconscious," Ortiz's throat visibly tightened and he paused a moment, closing his eyes and taking a deep breath.

"That was the hardest part.

"I just picked up the baby. I didn't bother to see if there was a pulse or breathing. That was no place to do it. I just picked up the baby, ran downstairs and carried her out.

"Mrs. Schultz, the neighbor who I asked to call 911, came out and I gave her the baby and went right back in," Ortiz said.

"I was concerned about the babysitter. With all this gas, all I kept thinking was, 'This place could blow up any minute now.' I just kept saying a prayer to myself, 'God, please don't let anything happen.'"

Overcome by gas, the babysitter, a 25-year-old Japanese exchange student, had collapsed against the kitchen's sliding door, wedging it shut, said Ortiz. His first attempts to open the door failed.

"When I heard moaning on the other side while I was trying to slide the door open, well, I started to panic. I just said, 'God, please help me open this door,' and then shoved it open.

"Then I saw Mr. Schultz outside, and yelled to him to come help me move her. By this time I was starting to feel the effects of the gas. He and I shut the gas off, picked her up, and took her outside. Once she was lying on the grass, she started to come to.

"I looked over and Elizabeth had her eyes open looking around," said Ortiz with a broad smile. "Then the paramedics and the fire department and the rescue squad arrived.

"Everything happened so fast that I didn't really think about it, until days later when I received a letter from the Montgomery County Fire Marshall's office, thanking me for everything," said Ortiz.

"I didn't know about the award [the Navy and Marine Corps Medal] until 14 February, when my LPO came in and said, 'I want to be the first to congratulate you,' and I said, 'For what?'

"'Jim, you're getting the Navy and Marine Corps Medal,'" he said.

"Later, when my commander brought me down a history of the medal, when I understood how much of an honor it was, I was just in shock," Ortiz explained. "I just did what, hopefully, anybody in the medical field would do, or any human being, any neighbor."

CAPT Don D. Wilson, MSC, deputy commander, NNMCC, hung the medal on Ortiz's chest 25 February during a ceremony at the National Naval Medical Center Bethesda. "They applauded for the

longest time, I thought it was never going to end," Ortiz laughed.

The day of the ceremony, Ortiz and his daughter went to one of the medical center's wards to visit CDR John Proctor, SC, director of supply management, who couldn't make the award ceremony because of an injury. "He gave Jessica the history of the medal, at her level, so that she could understand. And then he gave her a rose.

"She was so thrilled about it. She took the rose and pressed it between a stack of books this high," said Ortiz, spreading his arms and smiling. "That was her own personal award. That was very thoughtful and kind of Commander Proctor. All this really happened because an 8-year-old girl had the presence of mind to alert someone."

"I'm just glad Dad did the right thing and saved people's lives," Jessica said.

"Still, when the parents came over and thanked me, two days after the whole thing happened, that was the real reward," said Ortiz. "They made it to the ceremony a little late, but they were there. The little baby was there, running around wild and being a typical crazy 3-year-old. It was unbelievable."

"I am just very grateful that Mr. Ortiz was there, knew what to do, and did it," said Dawn Dyson, mother of the three children Ortiz rescued.

CAPT Raymond L. Mulhall, assistant Montgomery County fire marshal, commended Ortiz on his response. "It was terrific. The longer they had stayed in there, the worse the situation would have become for them."

Mulhall explained that in situations of oxygen deprivation and exposure to chemicals like natural gas, time is of the essence. Prolonged medical effects are directly related to the duration of the event.

"That he was able to go in, not cause any sparks, and remove these people from the area is extremely commendable," Mulhall said.

The details of this event traveled far. All the way up to the Oval Office, in fact. Perhaps the incident was expressed best in this excerpt from the letter presented to Ortiz along with the medal:

"By his courageous and prompt actions, in the face of great personal risk, Petty Officer Ortiz prevented a fire and explosion with great destructive potential and the possible loss of life, thereby reflecting great credit upon himself and upholding the highest traditions of the United States Naval Service. For the President, John H. Dalton, Secretary of the Navy."

Story by JOSN Roy DeCoster, reprinted from NNMCMC Bethesda's The Journal, 10 March 1994

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HEADLINE: Navy Medical Team Saves Life of German Tourist

NSHS San Juan, Puerto Rico (NSMN) -- Students and staff members of the Naval School of Health Sciences, Bethesda Detachment, in San Juan were conducting a field mission in Las Galeras, a remote area in northeastern Dominican Republic, when

an excited man turned up at their worksite. He explained that he rented out houses to tourists, and that one of his renters had a miscarriage early that morning. She was bleeding heavily, couldn't move, and needed immediate assistance. He feared she was going to bleed to death.

LCDR Gregory Martin, MC; Dr. Ramon Rojas, the school's Dominican military medical coordinator; and HM2 Ruperto Gonzalez left with the man to evaluate the patient and provide assistance.

About a mile away, the Navy medical team found a sick, febrile 35-year-old German woman hemorrhaging. She was in the early stages of septic and hemorrhagic shock. The team immediately started intravenous fluids and administered parenteral antibiotics. After a liter or so of fluids, she appeared to perk up and with further attention was medically stabilized.

Martin, Rojas and Gonzalez assisted the woman into a truck, IV in place, and transported her to an OB/GYN specialist several hours away for more definitive surgical and medical care. Their prompt response had probably meant the difference between life and death.

Meanwhile, those participating in the field mission saw 500 patients that day.

The two-week field mission is the culmination of the NSHS Bethesda Det.'s six-week course, "Medicine in the Tropics," which is conducted every 12 weeks for Navy medical officers. The first four weeks are spent studying tropical medicine topics of interest to operational medical readiness. The two-week field mission is a practical, hands-on clinical experience in remote rural areas of the Dominican Republic. The field team consists of the 10 Navy medical officers who are attending the course, four NSHS staff, and about 15 Dominican military and civilian medical and dental co-workers. This mission also included two staff members from the Navy Disease Vector Ecology and Control Center in Jacksonville, FL.

The program began in 1970 in Panama and was relocated to San Juan in 1989.

Story by CAPT H. James Beecham III, MC, OIC, NSHS Bethesda Det.

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HEADLINE: Corpsman Aids Victim

NMC Portsmouth, VA (NSMN) -- HM3 Trisha Moore, attached to Naval Medical Center Portsmouth's nursing service department, showed just how quickly and competently hospital corpsmen can perform when she unexpectedly came across someone in need.

While on liberty getting a haircut, Moore parked next to a man who looked like he was waiting for someone. Thinking nothing of it, she went in for her appointment. While waiting, two young girls rushed into the salon saying that there was a man outside who may be dead. Moore and another man responded to find the same man in his car. He had regurgitated and was in danger of choking and possibly aspirating. Other bystanders were wary because of the mess, but Moore knew what had to be done.

Quickly assessing the patient for injuries before moving him, Moore and the other man pulled the patient from the vehicle

and cleared his airway. Further assessment revealed that the patient was cold, clammy and smelled like alcohol. He was in and out of consciousness, but "there were no medical tags on him." Finally, Moore was able to get the patient to respond to her questions. He said that he was a diabetic. Because of her training, she was able to surmise that the patient may be in insulin shock.

While the other man watched the patient, Moore went into her car and retrieved some gum. Wetting the gum with a moist cloth and rubbing it on the patient's lips and gums made him respond. The sugar stabilized the patient, who remained conscious until local paramedics arrived. The man was then safely transported to the hospital. CDR Mike Gonzalez, head of the emergency department, stated, "In an acute or emergency setting, people die of too little sugar in their bloodstream, not too much, so she did the right thing." The paramedics who responded from Mercy Tidewater Ambulance were equally happy to have Moore's assistance. Richard Perrine stated in a letter of appreciation to the command, "Both paramedics advised me that had Moore not been on the scene, the patient may have aspirated the vomitus causing major airway complications and possibly a perilous outcome."

Moore's actions are summed up quite simply by herself in an everyday hospital corpsman attitude: "I didn't do this to get recognized, it's my job."

In this young petty officer's book, "standing by to assist" is more than a slogan, it's a willingness that highlights the can-do spirit of Naval Medical Center Portsmouth.
Story by LT J.D. Coleman, MSC

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HEADLINE: Good Samaritan Act Encourages Heroes to Step Forward
NMC San Diego (NSMN) -- When HM3 Dawn Wencke found herself kneeling on a bathroom floor, the sole provider of emergency care for a woman in cardiac distress at a McDonald's restaurant in Tulare, CA, these words did not cross her mind:

"No person who has completed a basic cardiopulmonary resuscitation course which complies with the standards adopted by the American Heart Association or the American Red Cross for cardiopulmonary resuscitation and emergency cardiac care, and who, in good faith, renders emergency cardiopulmonary resuscitation at the scene of an emergency, shall be liable for any civil damages as a result of any acts or omissions by such person rendering the emergency care."

Instead, the only words slipping in and out of Wencke's mind that day were of a simpler faith: "Please live, please live," spoken between breaths of life.

Wencke and her husband, Tony, were returning from a holiday visit with family last Christmas when they stopped to rest at the Tulare McDonald's. Fate determined they would be the lifesaving link between an older woman and the paramedics who arrived later to render more advanced care and to transport the victim to the local community hospital.

To the Wenckes' credit, the woman survived.

While neither Wencke nor her husband considered those words of protection, California legislators did and drafted them into law in 1959 as the first state to enact a series of codes known as the "Good Samaritan Act."

"Basically, the Good Samaritan Act is comprised of statutes written to protect individuals who render emergency medical aid at the scene of an emergency, disaster or some other area usually outside a hospital setting," said Theresa Carstens, assistant command judge advocate and attorney at Naval Medical Center San Diego.

But Carstens warns the laws are limited and do not necessarily and immediately protect providers of emergency medical care.

"In the Wenckes' case, the Good Samaritan Act doesn't protect them from being sued, it protects them when a lawsuit is filed," Carstens explained. "If they clearly fall into that category of volunteers who renders emergency care to save the life of another, then they are protected by the Good Samaritan Act."

Carstens said there are three basic criteria to determine whether the Good Samaritan Act applies. First, an emergency must exist. Second, volunteers who respond are still held responsible for providing reasonable care.

Said Carstens: "Gross negligence is not protected. The courts have not allowed the Good Samaritan Act as a shield for negligence."

The third criterion is that volunteers cannot expect compensation. Carstens added that numerous pages of law text have been published to further define terms such as emergency and its location. And virtually countless cases have established precedents that further define the letter of the law as it applies to the Good Samaritan Act.

"For example, in the State of Vermont, it has specific laws which require persons to react to save someone in an emergency situation, as long as their action doesn't pose a threat to themselves or others," Carstens said. "But, in California, the Wenckes were not required to render assistance by law."

Add to that the fact that the Good Samaritan Act is state law and almost demands that individuals, especially those trained in medical practice, be fully aware of various state applications of the Good Samaritan Act before an emergency arises.

"The spirit of the Good Samaritan Act is the simplest to state," Carstens explained, "it is to promote volunteering to save another's life if you have the knowledge and skills to do so."

Story by H. Sam Samuelson, reprinted from NMC San Diego's Dry Dock, 11 February 1994

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HEADLINE: Grand Round Abstracts

NMCL New Orleans (NSMN) -- Three members of the Navy Medical Clinic New Orleans staff participated in the American Heart Association's 36-mile "Heartride" on 6 March. Straddling their mountain bikes for the ride along the Mississippi River levee,

HM2 Richard Mechtly, HM3 Shannon Bales and HM3 Wayne Wroblewski joined about 100 other bikers, traveling from Oschner Hospital to Ormond Plantation and back again. The three corpsmen raised \$220 in contributions. This is the trio's second charity fund ride and won't be their last.

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NAVHOSP Cherry Point, NC (NSMN) -- The Havelock High School's Navy Junior ROTC program includes about 25 "junior corpsmen" who do volunteer work at Naval Hospital Cherry Point for the training and experience. Havelock High senior Erin Kidney and retired Marine Col Robert List got the hospital program started at the beginning of the school year. Before the students could start working at the hospital, they went through several hours of training, including a one-hour Red Cross class and a one-hour orientation with CAPT V. Paul Haws Jr., MSC, the hospital's commanding officer.

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NMC Portsmouth, VA (NSMN) -- In January, the construction contract for Naval Medical Center Portsmouth's Acute Care Facility was awarded after a long, involved process. The commander, Naval Facilities Engineering Command, commemorated the award with a congratulatory message to those who worked on the contract:

"Thanks for a job well done in planning, design, and construction contract award of the Acute Care Facility Your attention to detail, innovative management and contracting methods, and cooperation with the Defense Medical Facilities Office (DMFO) and the Bureau of Medicine and Surgery (BUMED) have resulted in the award of one of the largest, most complex and state-of-the-art medical facilities ever undertaken by this command. Congratulations."

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NEHC Norfolk, VA (NSMN) -- The Navy Environmental Health Center sponsored the first Navy Health Promotion Coordinator Training Course 20-25 February 1994. The course was presented by the Cooper Institute for Aerobics Research, Dallas, Texas, and gave about 50 civilian and military Navy Health Promotion coordinators an opportunity to receive formal training in program development, implementation and evaluation.

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REACH-OUT Bangalore, India (NSMN) -- In early 1993, "Reach-out," a U.S. organization, asked Indian-born Navy ophthalmologist CDR Shantinath, MC, to conduct practical workshops in intraocular lens implantation at the Trivandrum ophthalmic hospital.

On 24 November 1993, Shantinath and fellow Navy ophthalmologist LCDR Bateman, MC, arrived in Trivandrum and conducted two-week surgery courses for about 22 doctors.

This was Shantinath's second volunteer mission to India. The U.S. Navy accorded him permission in 1991 to conduct ophthalmic surgery courses in Davanagere Medical College.

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HEADLINE: HEALTHWATCH: End 'Nutrition Month' With Personal Change
BUPERS Washington (NSMN) -- March is National Nutrition Month. The continuing theme is "Eat Right America," but this year the emphasis is on reducing dietary fat and increasing fiber in the form of fruits, vegetables and whole grains. Make it your personal goal to change your lifestyle habits and to "Eat Right." Better dietary habits, coupled with 45 minutes of exercise four times a week, will help get you in shape for May's Fitness Month.

You can also use good food to fight the risk of cancer and heart disease. Five servings of fruits and vegetables provide fiber and important vitamin and mineral components that may help protect against cancers of the digestive tract, as well as heart disease.

To help meet your nutrition goal of five servings of fruit and vegetables a day, "shoot for fruit" in the morning. Start your day with fresh, canned or even dried fruits such as raisins or prunes. It's a good, low-fat, high-energy start to your day.

A low-fat diet is a must if you're watching your body-fat percentage. For men, that means less than 60 grams of fat per day; less than 50 for women. Navy Pubs and Forms can help, with NAVSUP Pub. 580, "Fat, Cholesterol, and Calorie List for General Messes." Order stock number 0530-LP-189-5900. If you need assistance, call Navy Forms at (DSN) 442-2626.

A low-fat diet is also a must if you're watching your cholesterol. Your body can make its own cholesterol if you feed it enough saturated fat. That means some foods advertised as "cholesterol-free" can still cause your cholesterol to stay high. To make sure your diet is low in saturated fat, follow a diet low in total fat and contact your local American Heart Association for more detailed information.

If you have questions about food, nutrition or a special diet, the American Dietetic Association consumer information hotline can help. Call 1-800-366-1655 between 0900 and 1600 Monday through Friday.

A checklist of foods to choose and foods to limit to help you control your fat intake, a low-fat guide to chow hall meals and other nutrition tips are available from the Bureau of Naval Personnel. Send a self-addressed, stamped envelope to: BUPERS, Pers-601, 2 Navy Annex, Washington, DC 20370-6010.

Story by Navy Dietician CDR Faythe Weber, MSC, Pers-601

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4. Month of March observations, events occurring 23-31 March and important dates in April (released by the Bureau of Naval Personnel):

MARCH

Women's History Month -- "In Every Generation, Action Frees Our Dreams"

National Nutrition Month

Cataract Awareness Month

Eye Donor Month

Hemophilia Awareness Month

National Kidney Month
National Chronic Fatigue Syndrome Awareness Month
Mental Retardation Awareness Month
National Social Work Month
EDI (Electronic Data Interchange) In Health Care Month
23 March: BUPERS has night detailing until 2200 EST
26 March, Sundown: Passover Begins
27 March: Palm Sunday
28 March: Reserve E-8/E-9 Board Convenes
30 March: Doctors' Day
31 March: E-5 Evaluations Due

APRIL (important dates from BUPERS)

11 April: Transfer/Redesignation Board Convenes
13 April: Night Detailing until 2200 Eastern Daylight Time
18 April: Active Commander MC, DC, NC, MSC Board Convenes
18 April: Active Commander Staff LDO Board Convenes
25 April: Medical Enlisted Commissioning Program Board

Convenes

28 April: Night Detailing until 2200 Eastern Daylight Time

REMINDER:

3 April, 0200: Daylight-saving time begins (set clocks forward one hour)

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